

**Analyst Name:** \_\_\_\_\_

**Procedures:** Sample Prep for Alcohol Analysis (P-ALC 101), Alcohol Analysis by Headspace GC-FID (P-ALC 102) and Alcohol Analysis Data Review and Reporting (P-ALC 103)

**Date Completed/Trainer**

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| _____ | Read current procedures provided.  |
| _____ | Observe the procedure performed by a trained analyst, at least once, including all parts of sample preparation, analysis, software, data processing, worksheets, preparation of logs and reports.                    |
| _____ | Prepare a set of five alcohol calibration standards, according to the procedure. Analyze those samples using the approved procedure and determine concentrations using a calibration performed by a trained analyst. |
| _____ | Using the approved procedure under general supervision of a trained analyst, analyze at least ten blood samples, in two batches of five, from the pool of past proficiency or previously analyzed samples.           |
| _____ | Independently, using the current procedure, successfully analyze five samples taken from a past proficiency set or previously analyzed samples.  |
| _____ | When previous criteria have been met, under the general supervision of a trained analyst, successfully analyze a set of current blood samples with accurate preparation of all worksheets, logs and reports.         |

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**Acceptance Criteria**

Standard calibration line must have a correlation coefficient of at least 0.99, each standard must have a reported value within  $\pm 10\%$  from the target value and the average error for components of the calibration line must be  $<10\%$ .

Sample concentrations are unknown to the analyst at the time of preparation. Satisfactory performance for this demonstration of proficiency is determined by having 90% or greater of the samples analyzed show agreement within  $\pm 15\%$  or 0.01, whichever is greater, of the previously determined value.

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**Approval of Completed Training**

The analyst named above has been trained and has demonstrated proficiency in the procedure cited.

**Alcohol Program Supervisor:** \_\_\_\_\_

**Effective Date:** \_\_\_\_\_